Name In Full | Certificate of Death

Minnie Barclay

Died at Town: Eden County: Somerset MARYLAND

Date 1900 Month: 2 Day: 24 | Age Y. M. D.: 6 | Native of: Md | Occupation

~~Male~~ Female | ~~White~~ Colored | Married Single | Widow Widower | Divorced Number of children living

Husband of Wife

Father's Name: Co Barclay | Mother's Name: Charlotte Barclay

Cause of Death: Primary: Pneumonia | How long sick: 1 week

Immediate | Accident, Suicide, Homicide

Reported by: E. A. Denson

Address: Maryland Md Undertaker

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 79889

Name in Full

Certificate of Death

Chas J. Bell

Died at Town Crisfield County Somerset MARYLAND

Date 1900 Month 2 Day 25 | Age Y. 74 M. D. | Native of Md. | Occupation Farmer

Male yes White yes Married yes Widow Divorced

Female Colored Single Widower Number of children living 4

Husband of Wife Hannah

Father's Name William Mother's Name Dout-known

Cause of Death { Primary Bronchitis, Chronic 70 | How long sick 25 yrs.

Immediate | Accident, Suicide, Homicide

Reported by Dr. J. F. Somers

Address Crisfield Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 79898

Name in Full

Certificate of Death

Anna Maria Bloodsworth

Died at Town: Mt Vernon County: Somerset MARYLAND

Date 1920 Month: Feb Day: 17 | Age Y. 66 M. 2 D. 7 | Native of Md | Occupation Housework

~~Male~~ Female | White / ~~Coloured~~ | Married ~~Widow~~ Single ~~Divorced~~ ~~Widower~~ | Number of children living 8.

~~Husband~~ Wife of Riddan Bloodsworth

Father's Name Walter Marsh. Mother's Name Ann Payton

Cause of Death: Primary Pneumonia 72 — How long sick 6 days

Immediate Exhaustion — ~~Accident, Suicide, Homicide~~

Reported by J. W. Wilson M. D.

Address Mt Vernon Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name In Full

Certificate of Death

Mary Anne Byrd

Died at Town: Crisfield County: Somerset MARYLAND

Date 1900 Month: Feb. Day: 8 | Age Y. 58 M. D. | Native of Md | Occupetion Housewife

~~Male~~ Femele | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ Widower | ~~Divorced~~ | Number of children living 2

~~Husband~~ ~~of~~ Wife Stephen Byrd

Father's Name J. Wm Cullen Mother's Name Nancy Cullen

Cause of Death: Primary Cancer of Stomache How long sick 3 years

Immediate Hem 25h ~~Accident, Suicide, Homicide~~

Reported by W. F. Hall

Address Crisfield Md

Must be signed by physician, if any in attendance, otherwise by coroner, underteker or minister.

LIBRARY BUREAU, 70893

Name in Full — Certificate of Death

Charles H. Ewing

Died at Town: Crisfield County: Somerset MARYLAND

Date 1900 Month: Feb Day: 18 | Age Y. 1 M. 3 D. | Native of Md. | Occupation —

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ | ~~Number of children living~~

~~Husband~~ of ~~Wife~~

Father's Name Charles H Ewing | Mother's Name Annie Ewing

Cause of Death — Primary: Undersized & low vitality at birth — How long sick —

Immediate: Myrasmus, 138a — ~~Accident, Suicide, Homicide~~

Reported by W. F. Hall

Address Crisfield Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Thor 2, Mara 44 - 7
Mary A Coulborn 38

Name in Full

Certificate of Death

James France

Died at Town: France County: Somerset MARYLAND

Date ~~1899~~ 1900 Month: Feb. Day: 5th | Age Y. 52 M. - D. - | Native of Md. | Occupation Oysterman

Male / ~~Female~~ | White / ~~Colored~~ | Married / Single / ~~Widow~~ / Widower | Divorced | Number of children living 6

Husband of Wife

Father's Name

Mother's Name 90

Cause of Death — Primary: Sclerosis of Liver — How long sick 4 months

Immediate

Accident, Suicide, Homicide

Reported by J. J. Windsor M.D.

Address Dublin Quarter Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 79893

Name In Full

Certificate of Death

Died at Town Deals Island County Somerset MARYLAND

Date 189 1900 Month Feb Day 2 | Age Y. M. D. 9 | Native of | Occupation

Male ~~White~~ Married Widow Divorced

~~Female~~ Colored Single Widower Number of children living

Husband of Wife

Father's Name Levin Huse

Mother's Name Tealey Huse

Cause of Death: Primary 161 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Undertaker T. W. Hendry

Address Deals Island

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78838

Attended by Dr. Non

of

Seen by Coroner

of

Information contained in this certificate received

from Jacob T Robison

of Deals Island

Md

Name in Full

Eliza A Jones

Certificate of Death

Died at Town Chance County Somerset MARYLAND

Date 1900 Month Feb. Day 25 | Age Y. 82 M. 10 D. 6 | Native of md | Occupation ———

~~Male~~ Female | ~~White~~ Colored | ~~Married~~ ~~Single~~ | Widow ~~Widower~~ | ~~Divorced~~ | Number of children living /

Husband of

Wife

Father's Name ———

Mother's Name [illegible] 100

Cause of Death — Primary: Kidney Disease — How long sick ———

Immediate: Paralytic Stroke — ~~Accident, Suicide, Homicide~~

Reported by Wm W Evans

Address Deals-Island Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. no Dr.

of

Seen by Coroner none

of

Information contained in this certificate received

from Jimmy E. Jones

of Chance P. O. Okla

Name In Full: Jessie E. Jones

Certificate of Death

Died at: Town: Deals Island County: Somerset MARYLAND

Date: 1900 Feb 22 (Month Day) | Age: Y. 50 M. D. | Native of: Somerset | Occupation: Laborer

Male ~~White~~ ~~Married~~ Widow Divorced

~~Female~~ Colored Single Widower Number of children living

Husband of Wife: 52

Father's Name: Eren Jones

Mother's Name: Tressie Jones

Cause of Death: Primary: Tumor on Brain

Immediate

How long sick

Accident, Suicide, Homicide

Reported by: Undertaker W. Hendrix

Address: Deals Island

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. Alexander

of Wells Island

Seen by Coroner .....

of .....

Information contained in this certificate received

from Wm Dick

of Wells Island

Name in Full

Certificate of Death

William Sims

Town

County

Died at Mt Vernon Somerset MARYLAND

Date ~~19~~ 1900 Month Feb Day 16 | Age Y. 90. M. 6, D. 18 | Native of Md. | Occupation Carpenter

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ Widower ~~Divorced~~ Number of children living 5

Husband ~~Wife~~ of Rachel Sims

Father's Name This information cannot be procured.

Mother's Name

Cause of Death: Primary Old Age 141 | Immediate

How long sick 6 months

~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by Chas Dashiell

Address Undertaker Mt Vernon Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name In Full

Certificate of Death

Capt. William Somers,

Died at near Princess Anne (Town) Somerset (County) MARYLAND

Date 1900 Month 2 Day 13 | Age Y. 86 M. D. | Native of | Occupation

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ Widower ~~Divorced~~ Number of children living 1

~~Husband of~~ Wife daughter of Henry Disharoon (Mary Disharoon)

Father's Name Capt. Saml. Somers Mother's Maiden Name

Cause of Death: Primary / Immediate 161 How long sick / Accident, Suicide, Homicide

Reported by Salisbury Advertiser

Address 2-17-1900

Must be signed by physician, if any in attendance, otherwis[illegible]y coroner, undertaker or minister.

LIBRARY BUREAU, 79893

Name in Full

Certificate of Death

Arinchin Tawes

Died at Town Crisfield County Somerset MARYLAND

Date 1900 Month Feb. Day 28 | Age Y. 44 M. — D. | Native of Md | Occupation Housewife

~~Male~~ White Married ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 6

~~Husband~~ of Wife Noah R. Tawes

Father's Name — Mother's Name — 22a

Cause of Death { Primary Pulmonary Consumption | Immediate —

How long sick 2 years

~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by W. F. Hall

Address Crisfield M[redacted]

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name In Full: John Alford Tilmon

Certificate of Death

Died at: Town: Deals Island County: Somerset MARYLAND

Date 189 Month Day: 1900 Feb 12

Aga Y. M. D.: 6

Native of

Occupation

Male ~~White~~ Married Widow Divorced

~~Female~~ Colored Single Widower Number of children living

Husband of Wife

Father's Name: Geo Tilmon

Mother's Name: Ida Tilmon

Cause of Death: Primary 161

Immediate

How long sick

Accident, Suicide, Homicide

Reported by: Undertaker T. A. Hendry

Address: Deals Island

Must be signed by physician, if any in attendance, otharwise by coroner, undertakar or ministar.

LIBRARY BUREAU, 79898

Attended by Dr. Alexander

of Devils Island

Seen by Coroner .....

of .....

Information contained in this certificate received

from Hamilton Jones

of Devils Island

Name in Full

Major Todd

Certificate of Death

Died at Town Dames Quarter County Somerset · MARYLAND

Date ~~1900~~ Month Feb. Day 11th | Age Y. 78. M. 3. D. 20 | Native of Md. | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | Divorced

Number of children living 3

Husband ~~Wife~~ of Hester A. Todd

Father's Name

Mother's Name

Cause of Death: Primary Pneumonia 72 | How long sick 10 days

Immediate Asthma | Accident, Suicide, Homicide

Reported by S. J. Windsor, M.D.

Address Dame Quarter Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898